

GAU 1647



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Assistant Commissioner for Patents
Washington, DC 20231

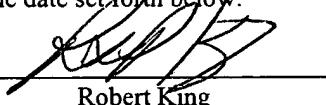
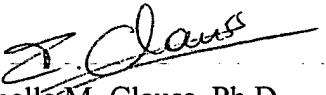
Re: U.S. Patent Application Serial No.: 09/181,311
Entitled: *In vitro Differentiation of Vascular Smooth Muscle Cells and Reagents Related Thereto*
By: Lee et al.; Filed: October 28, 1998
Examiner: Turner, S.; Group Art Unit: 1647
Attorney Docket No.: HUV-046.01 (formerly APV-382.01)

Dear Sir:

Enclosed for filing in the above-referenced patent application please find the following:

1. Fee Transmittal;
2. Response and Amendment;
3. Figures 6 and 9A (with additions in red noted thereon);
4. Check in the amount of \$54.00 for extra claims;
5. Petition for Three-Month Extension of Time;
6. Check in the amount of \$890.00 for the Extension of Time; and
7. Return receipt postcard.

The Commissioner is hereby authorized to charge any under-payments or credit any over-payments to our Deposit Account No. 06-1448.

Certificate of First Class Mailing	Respectfully submitted, FOLEY, HOAG & ELIOT LLP
<p>I hereby certify that this correspondence is being deposited with the U.S. Postal Service as First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, DC 20231 on the date set forth below:</p> <p><u>February 15, 2001</u></p> <p>Date</p> <p></p> <p>Robert King</p>	<p></p> <p>Isabelle M. Clauss, Ph.D. Reg. No. 47,326 Attorney for Applicants</p>



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of: Lee et al.

Serial No.: 09/181,311

Filed: October 28, 1998

For: *In vitro Differentiation of Vascular Smooth Muscle Cells and Reagents Related Thereto*

Examiner: Turner

Group Art Unit: 1647

Atty Docket No.: HUV-046.01
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February 15, 2001

Date of Signature and Mail Deposit

By:

Robert King

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FEES CALCULATION SHEET/TRANSMITTAL OF RESPONSE TO OFFICE ACTION

Sir/Madam:

Transmitted herewith is a Response to Office Action, Petition for Three Month Extension of Time, and all applicable fees.

	No. Claims after Amendment		Highest No. Previously Paid For	EXTRA		RATE	SMALL ENTITY		OTHER THAN SMALL ENTITY	
							ADDT'L FEE	OR	RATE	ADDIT. FEE
TOTAL	43	MINUS	40	3		x 9=	\$		x 18 =	\$54
INDEP.	11	MINUS	11	0		x 40 =	\$		x 80 =	\$0
[] FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						+130 =	\$		x 260 =	\$0
TOTAL ADDITIONAL						FEE	\$	OR	TOTAL	\$54

[X] Checks for \$ 54.00 for Extra Claims and \$ 890.00 for the Three Month Extension of Time are enclosed.

[X] Please charge any additional fees or credit any overpayments associated with this communication to our Deposit Account No. 06-1448.

Respectfully submitted,



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Date: February 15, 2001